FORM 4

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average I	ourden hours
per response	0.5

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

1. Name and Address of Reporting Person *

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name **and** Ticker or Trading Symbol CLS Holdings USA, Inc. [CLSH]]

C/O 1176		DIXIE HIGHWA	AY, #115			of Earliest Tra 2018	insaction (M	onth/E	Day/Yea	r)	-	Of	ficer (give title b	elow)	Other (sp	ecify below)	
(Street) MIAMI, FL 33156				4. It	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Ci		(State)	(Zip)		Table I - Non-Derivative Securities Acqu					Acani	ured, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/	Year) a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				ed (A)	Owned Following Transaction(s) (Instr. 3 and 4)		urities Beneficially		wnership orm: irect (D) Indirect	Beneficial Ownership	
							Code	V	Amou		Price				(I (I	nstr. 4)	
Common	Stock		11/30/2018				С		1,198,: (1)	568 A	\$ 0	13,47	4,821		D		
Common	Stock											5,442	,544		I	<u> 2)</u>	See Footnote
Reminder:	Report on a	separate line for each	th class of securities	benefici	ially	owned directl	, 	Perso this fo	orm are	respond to not require id OMB cor	ed to	respoi	nd unless t		ontained in isplays a	SEC 1	474 (9-02)
			Tab			ative Securit						wned					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative		3. Transaction Date (Month/Day/Year)	Execution Date, if	Code		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Expiration Date		Und	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Securities Beneficially Owned	Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security		Coo		V	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares			Following Reported Transaction(s (Instr. 4)	Direct (D or Indirect) (I) (Instr. 4)	
Special Warrants	<u>(3)</u>	11/30/2018		С			1,089,608 (1)	11/30	0/2018	<u>(4)</u>	U	nits	1,089,608	\$ 0	0	D	
Warrants	\$ 0.65	11/30/2018		С		1,198,568		11/30	0/2018	01/06/2021	Con	nmon	1,198,568	\$ 0	1,198,568	D	

Reporting Owners

Post Control Name (All and	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
Koretsky Frank C/O 11767 SOUTH DIXIE HIGHWAY, #115 MIAMI, FL 33156	X	X					

Signatures

/s/ Frank Koretsky	02/06/2019
Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- 1,089,608 Special Warrants were deemed automatically exercised on behalf of, and without any further action or additional consideration required on the part of, the Reporting Person on November 30, 2018. The Special Warrants entitled the Reporting Person to acquire 1.1 Units per Special Warrant, with each Unit comprised of one common share and one common share purchase warrant, resulting in the issuance of 1,198,568 shares of common stock and common share purchase warrants to the Reporting Person. The common share purchase warrants are exercisable at CAD\$0.65 per share and expire on January 6, 2021.
- (2) Owned by Newcan Investment Partners LLC, an entity wholly owned by the Reporting Person.
- (3) Exercisable for no additional consideration.
- (4) The Special Warrants did not have an expiration date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.